

UNITED STATES HOUSE OF REPRESENTATIVES 2018 FINANCIAL DISCLOSURE STATEMENT		Form A For Use by Members, Officers, and Employees	LEGISLATIVE RESOURCE CENTER 2019 MAY 15 PM 3: 55
Paul A. Gosar D.D.S.	Daytime Telephone:	9phone:	Office Use Only) OFFICE OF THE CLERK HIS HOUSE OF REPRESENTATIVES A \$200 penalty shall be assessed against any individual who files more than 30 days late.
FILER STATUS Member of the U.S. House of Representatives	State: AZ District: 04	Officer or Employing Office:	Staff Filer Type: (If Applicable) Shared Principal Assistant
REPORT 2018 Annual (Due: May 15, 2019)	Amendment	Termination Date of Termination:	nination:
PRELIMINARY INFORMATION - ANSWER EACH OF	CH OF THESE QUESTIONS		
A. Did you, your spouse, or your dependent child: a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? or b. Receive more than \$200 in unearned income from any reportable asset during the reporting period?	900 at the Yes X No 900 Poportable	F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar year up through the date of filing?	mangement with an the land no X
B. Did you, your spouse, or your dependent child purchase, sell, or exchange any securities or reportable real estate in a transaction exceeding \$1,000 during the reporting period?	tion Yes No	G. Did you, your spouse, or your dependent child receive any reportable gift(s) totaling more than \$390 in value from a single source during the reporting period?	lild receive any Yes No X
C. Did you or your spouse have "eamed" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the reporting period?	yg the Yes No	H. Did you, your spouse, or your dependent child receive any reportable travel or reimbursements for travel totaling more than \$390 in value from a single source during the reporting period?	lild receive any Yes No No No Proporting period?
D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period?	portable Yes X No	I. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article during the reporting period?	nation to charity in Yes No X
E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	period or Yes No No	E CO	RRESPONDING SCHEDULE IF YOU ANSWER "YES"
IPO AND EXCLUSION OF SPOUSE, DE	DEPENDENT, OR TRUST INFORMATION		ANSWER EACH OF THESE QUESTIONS
IPO - Did you purchase any shares that were allocated as a contact the Committee on Ethics for further guidance.	part of an Initial Public Offering during th	as a part of an initial Public Offering during the reporting period? If you answered "yes" to this question, please	uestion, please Yes 🔲 No 🔀
TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" nee from this report details of such a trust that benefits you, your spouse, or dependent child?	d by the Committee on Ethics and certal spouse, or dependent child?	in other "excepted trusts" need not be disclosed. Have you excluded	ave you excluded Yes 🗌 No 🔀
EXEMPTION – Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	assets, "unearned" income, transactions unave first consulted with the Committee	s, or liabilities of a spouse or your dependent child because they meet e on Ethics.	because they meet Yes No No

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-			\dashv					Ť	the account that exceeds the reporting thresholds. For bank and other cash accounts, total the amount in all interest-bearing accounts, if the total to over \$5,000, tist every financial institution where there is more than \$1,000 in interest-bearing accounts. If the total is over \$5,000, tist every financial institution where there is more than \$1,000 in interest-bearing accounts. For rental and other real property held for investment, provides a complete address property held for investment, provides a complete address to rescribe, and the geographic business, the nature of the activities, and its geographic location in Block A. Exclude: Your personal residence, including second fromes and vacation hones (unless there was rental income during the reporting period); and any financial income during the reporting period); and any financial interest in, or income derived from, a federal retirement program, including the Thrift Servings Plan. If you so choose, you may include that is an Excepted investment Fund (DC), or jointly held with snyone (SP) or dependent child (DC), or jointly held with snyone (JT), in the optional column on the far fer. For a detailed discussion of Schedule.	For all IRAs and other retrement plans (such as 401(k) plans) provide the value for each asset held in	Provide complete names of stocks and mutual funds (do not use only ticker symbols).	during the year.	and (b) any other reportable asset or source of income that generated more than \$200 in "unearned" income	production of income and with a fair market value exceeding \$1,000 at the end of the reporting period,	identify (a) each asset held for investment or	}	ı	Ϋ́
				Aunt Maud's Store, Flagstaff, AZ	Office Building: E Cedar Ave, Flagstaff, AZ		Examples		and the property of the proper		onipie oni	ý		25	©	Assets and/or Income Sources	ı	南
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Name: Paul A. Gosar D.D.S.

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SCHEDULE B - TRANSACTIONS Name: Paul A. Gosar D.D.S. Page 4 | 일 |

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Over \$1,000,000" (Spouse/DC Asset) =

Name: Paul A. Gosar D.D.S. Page 5 of 9

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. government) totaling \$200 or more during the reporting period. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000. See examples below. SCHEDULE C - EARNED INCOME

EXCLUDE: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

INCOME LIMITS and PROHIBITED INCOME: The 2018 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$28,050. The 2019 limit is \$28,440. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fluctary relationship) are totally prohibited.	d at or above the "senior staff" rate was relationship) are totally prohibited.	\$28,050. The 2019 limit is \$28,440.
Source (include date of receipt for honoraria)	Туре	Amount
Xoone State	Approved Teaching Fee	\$6,000
Examples: State of Maryland Civil Wer Roundtable (Opt. 2)	Spouse Speech	\$1,000 N/A

SCHEDULE D - LIABILITIES

Name: Paul A. Gosar D.D.S. Page 6 of 9

Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting period. Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence (unless you rent it out or are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to you by a spouse or the child, perent, or sibling of you or your spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of the reporting period exceeded \$10,000. *Column K is for liabilities held safely by your spouse or dependent child.

JT Compass	Example		SP.			aro,oco. Committe
Compass Bank, Flagstaff, AZ		First Bank of Wilmington, DE	Creditor			Condition to the management of the operation of the condition of the condi
	11/03	5/16	Date Liability Incurred MO/YR			approach to the
Mortgage on Office Bld (E ceadar)	Mortgage on Residence	Mortgage on Rental Property, Dover, DE	Type of Liability			Graden Grade
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			Over \$50,000,000	۷		
			Over \$1,000,000* (Spouse/DC Lisbility)	*		

SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, held during the current or prior calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. Exclude:

Positions hald in any religious, social, fraternal, or collitical entities (such as political parties and campaign organizations); and positions solely of an honorary nature.

Positions held in any religious, social, tratemal, or political e	Positions held in any religious, social, tratemal, or political entities (such as political parties and campaign organizations); and positions solely or an nonorary nature.
Position	Name of Organization
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SCHEDULE F - AGREEMENTS

Name: Paul A. Gosar D.D.S. 9

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Identify the date, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. government; or continuing participation in an employee welfare or benefit plan maintained by a former	
employer.	

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Date	Parties to Agreement	Terms of Agreement

SCHEDULE G - GIFTS

Report the source (by name), a brief description, and the value of all gifts totaling more than \$390 received by you, your spouse, or your dependent child from any source during the year. Exclude: Gifts from relatives, gifts of personal hospitality from an individual (which may not include a registered lobbyist or foreign agent), local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$156 or less need not be added towards the \$390 disclosure threshold. Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule and some gifts require prior approval of the Committee on Ethics.

	Source	Description	Value
Ехапрів:	Mr. Joseph Smith, Arlington, VA	Silver Platter (prior determination of personal Mendahip received from the Committee on Ethics)	\$400

SCHEDULE H - TRAVEL PAYMENTS and REIMBURSEMENTS

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Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$390 received by you, your spouse, or your dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor or were paid by you and relimbursed by the sponsor.

EXCLUDE: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (FGDA, 5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to the filer.

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	Source	Date(s)	City of Departure-Destination-City of Return	Lodging? (Y/N)	Food? (Y/N)	holuded? (YM)
	Government of China (MECEA)	Aug. 8-11	DC-Bajing, Orkna-DC	¥	٧	N
Examples:	Habital for Humanity (charity fundraiser)	Mar. 3-4	DC-Boolen-DC	Υ	Υ	Υ
The Heri	The Heritage Foundation	02/08/18-02/09/18	DC - Philadelphia, PA - DC	Υ	Υ	Z
Middle E	Middle East Forum	07/13/18-07/16/18	DC - London, England - DC	Y	Υ	Z
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SCHEDULE I -- PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of paying an honorarium to you. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Ethics. Examples: Association of American Associations, Washington, DC XYZ Magazine Source Name: Paul A. Gosar D.D.S. Activity Speech Article Feb, 2, 2018 Aug. 13, 2018 Date Page 9 **Amount** ુ 9 \$2,000 \$500